

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

DENHAM VICTORY FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="18635.82"/>	<input type="text" value="18635.82"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="49408.45"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="53172.60"/>	<input type="text" value="384514.79"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="102581.05"/>	<input type="text" value="403150.61"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10371.10"/>	<input type="text" value="310940.66"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="92209.95"/>	<input type="text" value="92209.95"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

DENHAM VICTORY FUND

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	49250.00	365435.00
(ii) Unitemized	100.00	800.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	49350.00	366235.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	9500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	49350.00	375735.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	3822.60	3822.60
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	4957.19
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	53172.60	384514.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	53172.60	384514.79

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	33.00	33.00
(b) Other Federal Operating Expenditures	10338.10	85914.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10371.10	85947.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	222493.05
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2500.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10371.10	310940.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10338.10	310907.66

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	49350.00	375735.00
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	49350.00	373235.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10338.10	85914.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3822.60	3822.60
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6515.50	82092.01

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)
A. FRANTZ WHOLESALE NURSERY, LLC

Mailing Address 12161 DELAWARE RD.

City State Zip Code
HICKMAN CA 95323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2012

Transaction ID : INCA218

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. MICHAEL FRANTZ

Mailing Address 12161 DELAWARE RD.

City State Zip Code
HICKMAN CA 95323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2012

Transaction ID : IDTA58

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. NUNES FARMS

Mailing Address 3990 S. THRIFT RD.

City State Zip Code
MERCED CA 95341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2012

Transaction ID : INCA219

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

A. MARVIN NUNES
 Full Name (Last, First, Middle Initial)
 Mailing Address 3990 S. THRIFT RD.
 City MERCED State CA Zip Code 95340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer L & N FARMS Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2012
Transaction ID : IDTA59
 Amount of Each Receipt this Period
 2500.00
[MEMO ITEM]

B. LORNA WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5397 MENDES CT.
 City Atwater State CA Zip Code 95301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation NONE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2012
Transaction ID : INCA216
 Amount of Each Receipt this Period
 5000.00

C. FRED ESCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 19967 GIBBS DR.
 City Sonora State CA Zip Code 95370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BLUE MOUNTAIN MINERALS Occupation BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : INCA227
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

A. Mission Ranches Co. LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Broadway
 City King City State CA Zip Code 93930
 Date of Receipt: 10 / 19 / 2012
Transaction ID : INCA242
 Amount of Each Receipt this Period: 1500.00
 Aggregate Year-to-Date: 1500.00
 Receipt For: Primary General Other (specify) ▼
 Name of Employer: Occupation: FEC ID number of contributing federal political committee: C

B. John Romans
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Broadway
 City King City State CA Zip Code 93930
 Date of Receipt: 10 / 19 / 2012
Transaction ID : IDTA62
 Amount of Each Receipt this Period: 1500.00
 Aggregate Year-to-Date: 1500.00
 Receipt For: Primary General Other (specify) ▼
 Name of Employer: Mission Ranches Occupation: Farmer
[MEMO ITEM]
 Name of Employer: Occupation: FEC ID number of contributing federal political committee: C

C. RICHARD NEVES
 Full Name (Last, First, Middle Initial)
 Mailing Address 347 WEYMOUTH WAY
 City Chico State CA Zip Code 95973
 Date of Receipt: 10 / 19 / 2012
Transaction ID : INCA240
 Amount of Each Receipt this Period: 250.00
 Aggregate Year-to-Date: 250.00
 Receipt For: Primary General Other (specify) ▼
 Name of Employer: SELF-RICHARD NEVES Occupation: INSURANCE AGENT
 Name of Employer: Occupation: FEC ID number of contributing federal political committee: C

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)
A. R. C. PACKING LLC

Mailing Address 28789 EL CAMINO REAL NORTH

City State Zip Code
GONZALES CA 93928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : INCA241

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. CAPRARA, DENNIS

Mailing Address 23527 BELMONT CIRCLE

City State Zip Code
Salinas CA 93908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
R.C. FARMS FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : IDTA61

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. JANICE CAPRARA

Mailing Address 26769 EL CAMINO REAL, N.

City State Zip Code
GONZALES CA 93926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RC FARMS FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : IDTA60

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial) A. NEAL PARTNERS LP		Date of Receipt
Mailing Address 3823 N HWY 59		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City Merced	State CA	Zip Code 95348
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA243
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) B. AMANDA NEAL		Date of Receipt
Mailing Address 3823 N HWY 59		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City Merced	State CA	Zip Code 95348
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : IDTA64
Name of Employer NEAL PARTNERS LP		Amount of Each Receipt this Period
Occupation EXECUTIVE		<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="2500.00"/>		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. STACI NEAL		Date of Receipt
Mailing Address 3823 N HWY 59		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City Merced	State CA	Zip Code 95348
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : IDTA63
Name of Employer NEAL PARTNERS LP		Amount of Each Receipt this Period
Occupation EXECUTIVE		<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="2500.00"/>		[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="5000.00"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)
A. MICHAEL KLEPPER

Mailing Address 7020 N MARKS APT. 111

City Fresno	State CA	Zip Code 93711
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FEC ID number of contributing federal political committee. **C**

Name of Employer Gary Mc Keighan Insurance Agency Inc	Occupation VP
--	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

Transaction ID : INCA249

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. GUY MORRISON

Mailing Address 2420 JENSEN AVE.

City Sanger	State CA	Zip Code 93657
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Morrison Insurance Assoc	Occupation BUSINESS OWNER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

Transaction ID : INCA251

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. NH3 SERVICE COMPANY

Mailing Address 945 JOHNSON AVE.

City Salinas	State CA	Zip Code 93901
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

Transaction ID : INCA244

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 24
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)
A. JAMES LIPE, JR.

Mailing Address 945 JOHNSON AVE.

City Salinas	State CA	Zip Code 93901
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FEC ID number of contributing federal political committee. **C**

Name of Employer NH3 SERVICE COMPANY	Occupation PARTNER
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : IDTA68

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. WILLIAM LIPE

Mailing Address 945 JOHNSON AVE.

City Salinas	State CA	Zip Code 93901
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NH3 SERVICE COMPANY	Occupation PARTNER
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : IDTA69

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. Nick Oh

Mailing Address P.O. Box 6248

City Salinas	State CA	Zip Code 93912
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FEC ID number of contributing federal political committee. **C**

Name of Employer CalPro	Occupation Owner
----------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

Transaction ID : INCA254

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

A. JORDAN ROACH
Full Name (Last, First, Middle Initial)

Mailing Address 10270 N. ROWELL AVE.

City Fresno	State CA	Zip Code 93730
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GLOBAL AG INSURANCE SERVICES	Occupation INSURANCE
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

Transaction ID : INCA253

Amount of Each Receipt this Period

250.00

B. SHARON RUCKER
Full Name (Last, First, Middle Initial)

Mailing Address 736 W. 18TH ST.

City Merced	State CA	Zip Code 95340
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-SHARON RUCKER	Occupation ATTORNEY
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

Transaction ID : INCA252

Amount of Each Receipt this Period

500.00

C. TOM BENGARD RANCH
Full Name (Last, First, Middle Initial)

Mailing Address 379 W MARKET ST

City Salinas	State CA	Zip Code 93901
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2012

Transaction ID : INCA245

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional).....▶	5750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)
A. TERRY BENGARD

Mailing Address 955 OLD STAGE RD.

City Salinas State CA Zip Code 93908

FEC ID number of contributing federal political committee. **C**

Name of Employer TOM BENGARD RANCH Occupation AG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2012

Transaction ID : IDTA65

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. TOM BENGARD

Mailing Address 379 W MARKET ST

City SALINAS State CA Zip Code 93901

FEC ID number of contributing federal political committee. **C**

Name of Employer TOM BENGARD RANCH Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2012

Transaction ID : IDTA66

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. JOHN TROOST

Mailing Address 24868 RD. 9

City Chowchilla State CA Zip Code 95610

FEC ID number of contributing federal political committee. **C**

Name of Employer Fred & John Troost No 1 Inc Occupation PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2012

Transaction ID : INCA250

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)
A. ROBERT WEIMER

Mailing Address 5120 N. ARENA WAY

City State Zip Code
ATWATER CA 95301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A NOT EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2012

Transaction ID : INCA255

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. NIELSEN PROPERTIES LTD.

Mailing Address P. O. BOX 4171

City State Zip Code
SALINAS CA 93912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : INCA262

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Donald Nielsen

Mailing Address 107 GEIL ST.

City State Zip Code
Salinas CA 93901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Nielsen Trucking Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : IDTA67

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)
A. Donald Nielsen

Mailing Address 107 GEIL ST.

City Salinas State CA Zip Code 93901

FEC ID number of contributing federal political committee. **C**

Name of Employer Nielsen Trucking Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : INCA259

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Donald Nielsen

Mailing Address 107 GEIL ST.

City Salinas State CA Zip Code 93901

FEC ID number of contributing federal political committee. **C**

Name of Employer Nielsen Trucking Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : INCA258

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. RONI ROBERTS

Mailing Address 895 POPPY COURT

City Oakdale State CA Zip Code 95361

FEC ID number of contributing federal political committee. **C**

Name of Employer BEST EFFORT LETTER SENT 10/24/12 Occupation BEST EFFORT LETTER SENT 10/24/12

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : INCA260

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial) A. SHAY ROBERTS		Date of Receipt
Mailing Address 895 POPPY COURT		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Oakdale	CA	95361
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA261
Name of Employer	Occupation	Amount of Each Receipt this Period
BEST EFFORT LETTER SENT 10/24/12	BEST EFFORT LETTER SENT 10/24/12	<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. LOREN FREEMAN		Date of Receipt
Mailing Address 11312 ROAD 21 1/2		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Madera	CA	93637
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA263
Name of Employer	Occupation	Amount of Each Receipt this Period
FREEMAN FARMS	BUSINESS OWNER	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RICHARD COTTA		Date of Receipt
Mailing Address 1412 PARKS RD.		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>
City	State	Zip Code
Hughson	CA	95326
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA267
Name of Employer	Occupation	Amount of Each Receipt this Period
COTTA FARMS	FARMER	<input type="text" value="1000.00"/>
Receipt For: 2012	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="6250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial) A. RAYMOND COSTA		Date of Receipt
Mailing Address PO BOX 10130		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Salinas	CA	93912
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA269
Name of Employer	Occupation	Amount of Each Receipt this Period
MCDONALDS	BUSINESS OWNER	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. RODNEY BRAGA		Date of Receipt
Mailing Address P. O. BOX 425		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
SOLEDAD	CA	93960
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA271
Name of Employer	Occupation	Amount of Each Receipt this Period
BRAGA RANCH	FARMER	<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3500.00"/>	

Full Name (Last, First, Middle Initial) C. STEVE SCARONI		Date of Receipt
Mailing Address P. O. BOX 268		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
HEBER	CA	92249
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : INCA272
Name of Employer	Occupation	Amount of Each Receipt this Period
VALLEY HARVESTING & PACKING	EXECUTIVE	<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)
A. ALAN VALLARINE
Mailing Address 1840 N OLIVE, STE 4
City State Zip Code
Turlock CA 95382
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SELF - ALAN VALLARINE DENTIST
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2012
Transaction ID : INCA268
Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. GARY CARACCIOLI
Mailing Address 1102 PALO ALTO WAY
City State Zip Code
Salinas CA 93901
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
SELF GARY CARACCIOLI FARMER
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012
Transaction ID : INCA275
Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
C.
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶ 49250.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 24
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address 320 FIRST ST. S.E.
City WASHINGTON State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
3822.60

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2012
Transaction ID : INCA215
Amount of Each Receipt this Period
3822.60
REFUND OF OVERPAYMENT

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	3822.60
TOTAL This Period (last page this line number only).....▶	3822.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)

A. DAVID BAUER

Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code
SACRAMENTO CA 95833

Purpose of Disbursement
ACCOUNTING SVC.

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2012

Transaction ID : EXPB214

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. DIANE STONE & ASSOC.

Mailing Address 10229 WHITETAIL DR.

City State Zip Code
OAKDALE CA 95361

Purpose of Disbursement
FUNDRAISING COMMISSION, PRINTING

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : EXPB264

Amount of Each Disbursement this Period

7349.82

Full Name (Last, First, Middle Initial)

C. MARRIOTT REWARDS

Mailing Address P. O. BOX 94014

City State Zip Code
PALATINE IL 60094

Purpose of Disbursement
CREDIT CARD PAYMENT

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : EXPB266

Amount of Each Disbursement this Period

637.49

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8237.31

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)

A. FAIRFIELD INN & SUITES

Mailing Address

City State Zip Code

Purpose of Disbursement
LODGING

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : EDTB22EXPB266

Amount of Each Disbursement this Period

210.56

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARRIOTT HOTEL

Mailing Address 333 W. HARBOR DR.

City State Zip Code
SAN DIEGO CA 92110

Purpose of Disbursement
LODGING

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : EDTB21EXPB266

Amount of Each Disbursement this Period

426.93

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CRYSTAL ROWLAND

Mailing Address 302 WASHINGTON ST. #555

City State Zip Code
SAN DIEGO CA 92103

Purpose of Disbursement
FUNDRAISING COMMISSION

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : EXPB265

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
DENHAM VICTORY FUND

Full Name (Last, First, Middle Initial)

A. DELUXE BUSINESS FORMS

Mailing Address P. O. BOX 1186

City LANCASTER State CA Zip Code 93534

Purpose of Disbursement
SUPPLIES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB274

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DENHAM VICTORY FUND

A. Full Name (Last, First, Middle Initial) **Transaction ID : EXPH4270**
EFUNDRAISING CONNECTION
Mailing Address 2131 CAPITOL AVE. #306

City State Zip Code
Sacramento CA 95816

Purpose of Disbursement:
PROCESSING FEE

Activity or Event Identifier:
Administrative

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
33.00

Date 10 / 31 / 2012

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		33.00		33.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		33.00		33.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
0.00		33.00		33.00